

RCE

REQUEST FOR CONTINUED EXAMINATION (RCE) TRANSMITTAL Mail Stop RCE Commissioner For Patents P.O. Box 1450 Alexandria, Virginia 22313-1450	Application Number:	10/214,462
	Filing Date:	March 21, 2004
	First Named Inventor:	Patrick Antonelli
	Group Art Unit:	3738
	Examiner Name:	Christopher D. Prone
	Attorney Docket No.	GRA01236P00021US



This is a Request for Continued Examination (RCE) under 37 C.F.R. §1.114 of the above-identified application. Request for Continued Examination (RCE) practice under 37 CFR 1.114 does not apply to any utility or plant application filed prior to June 8, 1995, or to any design application.

1. **Submission required under 37 C.F.R. §1.114** Note: If the RCE is proper, any previously-filed unentered amendments and amendments enclosed with the RCE will be entered in the order in which they were filed unless applicant instructs otherwise. If applicant does not wish to have any previously filed unentered amendment(s) entered, applicant must request non-entry of such amendment(s).

- a. ☐ Previously submitted. If a final Office Action is outstanding, any amendments filed after the final Office Action may be considered as a submission even if this box is not checked.
- i. ☐ Consider the arguments in the Appeal Brief or Reply Brief previously filed on _____.
 - ii. ☐ Other: _____.
- b. ☒ Enclosed:
 - i. ☐ Amendment/Reply
 - ii. ☒ Affidavit(s)/Declaration(s)
 - iii. ☐ Information Disclosure Statement
 - iv. ☒ Petition for Extension of Time
 - v. ☒ Other: Request For Reconsideration

2. **Miscellaneous.** Suspension of action on the above-identified application is requested under 37 CFR 1.103(c) for a period of:
- a. ☐ _____ months. (Period of suspension shall not exceed 3 months. Fee under 37 CFR 1.17(i) required)
 - b. ☐ Other _____

3. **Fees.** The RCE fee under 37 CFR 1.17(e) is required by 37 CFR 1.114 when the RCE is filed. The filing fee has been calculated as shown below:

Small Entity						Large Entity	
For	Claims After Amendment	Highest Number Previously Paid For	Extra Claims	Rate	Fee	Rate	Fee
Basic Fee					\$395.00	OR	\$790.00
Total Claims	10	20	0	x \$25.00	\$	OR	x \$50.00
Independent Claims	1	0	0	x \$100.00	\$	OR	x \$200.00
Multiple Dependent Claims				x \$180.00	\$	OR	x \$360.00
TOTAL					\$395.00	OR	TOTAL
							\$

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- a. ☒ The Director is hereby authorized to charge the following fees, any underpayment of fees, or credit any overpayments, to Deposit Account No. 23-0785. I have enclosed a duplicate copy of this sheet.
- i. ☒ RCE filing fee
- iii. ☐ Other _____
- b. ☒ A check in the amount of \$395.00 to cover the fees is enclosed.


4. **Correspondence Address:**

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500 West Madison Street
Chicago, Illinois 60661
Telephone: (312) 876-1800
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Customer Number: 32116

Date: March 6, 2006

Attorney's Signature


F. William McLaughlin, Reg. No. 32,273

CERTIFICATE OF MAILING

I hereby certify that this document and fee (if applicable) is being deposited with sufficient postage as First Class Mail in an envelope addressed to: Commissioner for Patents, P.O. Box 1450, Alexandria, Virginia 22313-1450 on **March 6, 2006**.